Entered -09-29-97 - tew CL 97L0602- ALEXIS HOLMES

CLAIM OF: ROBERT L. GREENE

3049 Middleton Road, Apt. #1 Atlanta, Georgia 30311

For property damage alleged to have been sustained as a result of a vehicular accident on August 28, 1997 at 3049 Middleton Road.

BY PUBLIC SAFETY AND LEGAL ADMINISTRATION COMMITTEE:

BE IT RESOLVED by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to ROBERT L. GREENE the sum of \$1,000.00 in full settlement and satisfaction of all claims, past, present and future, of every kind and character for damages alleged to have been sustained as a result of a vehicular accident on August 28, 1997 at 3049 Middleton Road as is more particularly set forth in the within claim; said sum taken from and charged to account 1A01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: SUSAN PEASE LANGFORD CITY ATTORNEY

BY:

ROBERT N. GODFREY DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 97L0602	Date: <u>12/28/00</u>			
Claimant /Victim_ROBERT L. GREENE				
BY: (Atty)				
Address: 3049 Middleton Road Apt. #1, Atlan	ta Georgia 30311			
Subrogation: Claim for Property damage \$	1 277 20 Podily Injury 6			
Date of Notice: 9/16/97 Method: Wr	itten proper Y Improper			
Conforms to Notice: O C G A 836-33-5	Ante Litem (6 Ma)			
Date of Notice: 9/16/97 Method: Written, proper X Improper Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X Date of Occurrence 8/28/97 Place: 3049 Middleton Road, The Allen Temple Apartments				
Department Fire Department	Division: Station Five			
Employee involved Unknown	Division: Station Five Disciplinary Action: No			
Zimploydd mydiydd <u>Olikilowll</u>	Disciplinary ActionNo			
NATURE OF CLAIM: The claimant's vehicle was	damaged when it was struck by a fire truck.			
INVESTIGATION:				
Statements: City amployee Claimant 3	Z Othon Walter V O 1 W			
Pictures Diagrams Paparts: Police	Other Written X Oral X			
Traffic citations issued: City Driver	Dept Report X Other			
Citation disposition: City Driver	Claimant Driver Claimant Driver			
Chanon disposition. City Driver	_ Claimant Driver			
BASIS OF RECOMMENDATION:				
Function: Governmental X	Ministerial Other Damages reasonable			
Improper Notice More than Six Months	Other Damages reasonable			
City not involved Offer reject	ted Compromise settlement X			
Lepair/replacement by Ins. CoRepair/replacement by City Forces Claimant Negligent City Negligent XJoint Claim Abandoned				
Claimant Negligent City Negligent	X Joint Claim Abandoned			
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Respectfully submitted,				
	1001/40			
	Cliffs Tomes			
	INVESTIGATOR - ALEXIS HOLMES			
DECOMMENDATION.				
RECOMMENDATION:				
Pay \$1,000.00 / Adverse / Account,	ahargad, 1401 V 2101 21101			
Claims Manager: ////	charged: 1A01 X 2J01 2H01 Concur/date 12-29-01			
Committee Action.				
Committee Action.	Council Action			
EODM 22 (1				

COUNCIL OF THE CIT	Z ATT ANDRA	. *	09/2	3197DL
CLERK OF COUNCIL	? ATLANTA	Æ	: CLAIMS FOR DAY	IAGES
CITY HALL	DREI	C 3 9 1 1 3		
68 Mitchell Street, S.W.	1 y 18 8			
Atlanta, Georgia 30303		то	day's date: <u>09</u> -	DI-97
·	LE SEP	6 / FNTEDED	- 9/29/97 - te	
Dear Sir:	L	97L0602	- ANTHONY G. C	:₩)ATTS
	MUNICIF	AL CLEAK !		
This is to notify the City of A	Atlanta that I have suffered	iamages in the sum	of \$12.77.	30°
property and/or \$	bodily injury for wh	ich I contend the City	is liable.	α .1-
1. Date of Accident: DS	70 07	1 D.F. 914	Fire Dept	. CAllec
(mont	h) (day) (year)	2. Police called: _		
3. Location of accident:		le Ant's	(yes) (no)	
	3049 middlet			_ ·
4. Name of your insurance	company:		Policy #	
		•		ı dha.
5. State how the accident of Scrapped 4	courred: The accid	dent occur	rred with	
treman, w	ere Dreceedin	a to put c	but an tire	2 and
= rupped +	re car, with	the woter	hose.	
) w /	i i c c c c c c c c c c c c c c c c c c	se other side if necessa	ıry)
6. If a vehicular accident	complete the following a	nd attack ton. (2)		
ESTIMATES AND V	EHICLE DAMAGES A	nd attach two (2) e	stimates of repair.	
MAKING OF FALSE	STATEMENTS WILL R	ESI/IT IN VOUD C	INSPECTION. 1	THE
AND MAY RESULT I	N CRIMINAL PROSEC	TION! The registe	red owner must make	<u>(EI)</u>
claim for vehicle damage	es.	THE TEBIOLO	tod office milist make	the
7. Your vehicle: Lli SSC	(Altimo)02		a	0 110
		340-MAB	Robert L	. Wisens
(make	c) (year)	(tag #)	(driver's name)	
8. City vehicle:				
(make	driver's	name)	(department)	•
	·	•	(aufminient)	
9. Witness:				
(name	(phone)		(address)	
10. The acknowledgment of t	his alaim in na man aire	4.0		_
10. The acknowledgment of the Atlanta, as granted by Sta	ate Law, nor is it an admissi	on a Cliability are ball	nmunity of the City	of
and/or its employee(s).	ine and the test and admissi	on or naturity on och	air of the City of Atlar	ita
• • • • • • • • • • • • • • • • • • • •				
I HEREBY CERTIFY	THE ABOVE INFORMA	TION IS TRUE AN	ND CORRECT.	
			w commet.	
11. THIS CLAIM SHOULD				
IMMEDIATELY TO THE	IE ADDRESS			
SHOWN ABOVE.		77 - 2 - 1	1 Acap	10
		<u>100061+</u>	L. Green (claimant) Middleton	,
		2010	(claimant)	21#1
		<u> </u>	(addman)	
		Atlant	(address)	7311
		(city)	(state) (Zip	<u>ا ر ر</u>
		1404/691-1	1764 -	7
01 / 0000		(home)	(phone) (world	k)
01- \mathcal{R} -0003		- -	, , , , , , , , , , , , , , , , , , ,	•
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